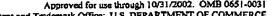
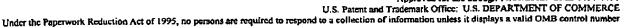
Please type a plus sign (+) inside this box → [+]

Box RCE

PTO/SB/30 (10-01)

Approved for use through 10/31/2002. OMB 0651-0031







## Application Number 09/361.542 REQUEST Filina Date July 27, 1999 **FOR** First Named Inventor Douglas Joseph Dobrozsi CONTINUED EXAMINATION (RCE) Group Art Unit 1615 TRANSMITTAL Examiner Name A. E. Pulliam Address to: Attorney Docket Number 7247M Assistant Commissioner for Patents

Confirmation Number Washington, D.C. 20231 5652 This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

NOTE: Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. 1. Submission required under 37 C.F.R. § 1.114 a. [ ] Previously submitted i. [ ] Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on \_ (Any unentered amendment(s) referred to above will be entered). [ ] Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_ iii. [] Other\_ b. Enclosed i. [X] Amendment/Reply ii. [ ] Affidavit(s)/Declaration(s) iii. [ ] Information Disclosure Statement (IDS) iv. [ ] Other \_ 2. Miscellaneous Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a a. 11 period of \_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required) **b**. ∏ Other \_\_\_\_ 3. Fees The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed. [X] The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>16-2480</u> [X] RCE fee required under 37 C.F.R. §1.17(e) [X] Extension of time fee (37 C.F.R. §§1.136 and 1.17) iii. [] Suspension of action fee under 37 C.F.R. 1.17(i) iv. [] Other \_\_\_ SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Reg. No. (Attorney/Agent) 43,962 NAME (Print/Type) Joan B. Cunningham SIGNATURE DATE February 10, 2003 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office on the date shown below: NAME (Print/Type) Joan B, Cunningham SIGNATURE DATE February 10, 2003

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be said to provide individual case. Any comments on the amount of time you are required to complete this form should be said to provide individual case. Any comments on the amount of time you are required to complete this form should be said to provide individual case. Any comments on the amount of time you are required to complete this form. D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send Fees and Completed forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, D.C. 20231. To Page use 4/22/02)

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